

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Donovan for Congress				
ADDRESS (number and street) PO Box 60530				
CITY Staten Island		STATE NY		ZIP CODE 10306-1333
2. NAME OF CANDIDATE Donovan, Dan, , ,		3. OFFICE SOUGHT (State and District) House NY 11		4. FEC IDENTIFICATION NUMBER C00571869
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME Rogers, Daniel, , ,		Name of Employer Rogers Surveying, PLLC		Date (month, day, year) 10/27/2016
MAILING ADDRESS 120 Bayview		Transaction ID : 63F647204A2694AF8		Amount 1000.00
CITY Staten Island	STATE NY	ZIP CODE 10309	Occupation Land Surveyor	
B. FULL NAME Gonchar, Andrew, , ,		Name of Employer Shore to Shore Realty		Date (month, day, year) 10/27/2016
MAILING ADDRESS 93 Goff Avenue		Transaction ID : 606AB81ACAFB0497		Amount 1000.00
CITY Staten Island	STATE NY	ZIP CODE 10309-2802	Occupation Real Estate	
C. FULL NAME Pasaturo, Joseph, , ,		Name of Employer Self-Employed		Date (month, day, year) 10/27/2016
MAILING ADDRESS 224 Douglas Road		Transaction ID : 6B88D319743724B1D		Amount 1000.00
CITY Staten Island	STATE NY	ZIP CODE 10304-1556	Occupation Engineer	
D. FULL NAME Costa, Thomas, , ,		Name of Employer Information Requested		Date (month, day, year) 10/27/2016
MAILING ADDRESS 796 Todt Hill Road		Transaction ID : 619CCD34D77974F6C		Amount 1000.00
CITY Staten Island	STATE NY	ZIP CODE 10304	Occupation Information Requested	
E. FULL NAME Marino, Joseph, J., , Jr.		Name of Employer Information Requested		Date (month, day, year) 10/27/2016
MAILING ADDRESS 80 Bayview Terrace		Transaction ID : 6E751C52226E143AE		Amount 1000.00
CITY Staten Island	STATE NY	ZIP CODE 10312	Occupation Information Requested	
SIGNATURE (optional) Martin, Steven, , ,			DATE 10/28/2016	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
[Electronically Filed]				

Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

FEC FORM 6
(Revised 03/2016)

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE Padula, Theresa, C., , 54 Florence Place Staten Island NY 10309-3613	Name of Employer Information Requested Transaction ID : 66039B5120D974D64901 Occupation Information Requested	Date (month, day, year) 10/27/2016	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Vento, John, J., , 95 New Dorp Ln Staten Island NY 10306-2324	Name of Employer Self-Employed Transaction ID : 65182FDEC466747809FB Occupation CPA	Date (month, day, year) 10/27/2016	Amount 1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Daszkowski, Walter, , , 5 South Beers Street Holmdel NJ 07733	Name of Employer Information Requested Transaction ID : 66ED4F015FD614E61A75 Occupation Information Requested	Date (month, day, year) 10/27/2016	Amount 1000.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Comcast Corporation & NBCUniversal PAC 1701 John F Kennedy Blvd One Comcast Center Philadelphia PA 19103-2833	Name of Employer Transaction ID : 6D8C517C00BF54A93A3A Occupation	Date (month, day, year) 10/27/2016	Amount 2000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Conservative Opportunities for a New America PAC 110 West Louisiana Avenue Suite 312 Midland TX 79701	Name of Employer Transaction ID : 647CC76B6D37B4E85BB4 Occupation	Date (month, day, year) 10/27/2016	Amount 1000.00

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A. FULL NAME, MAILING ADDRESS AND ZIP CODE NLO Strategies LLC 14 Hemlock Drive Sleepy Hollow NY 10591			
Name of Employer		Date (month, day, year) 10/28/2016	
Amount 1000.00		Transaction ID : 699273F0194CA455F941	
Occupation			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Amount		Occupation	
Occupation			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Amount		Occupation	
Occupation			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Amount		Occupation	
Occupation			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
Name of Employer		Date (month, day, year)	
Amount		Occupation	
Occupation			